



**Contract Number**

19-541 A-1

**SAP Number**

4400012062

**Arrowhead Regional Medical Center**

<b>Department Contract Representative</b>	<u>William L. Gilbert, Director</u>
<b>Telephone Number</b>	<u>(909) 580-6150</u>
<b>Contractor</b>	<u>Santa Rosa Staffing, Inc.</u>
<b>Contractor Representative</b>	<u>Meg Cilberto</u>
<b>Telephone Number</b>	<u>(404) 798-3691</u>
<b>Contract Term</b>	<u>August 6, 2019 through December 1, 2022</u>
<b>Original Contract Amount</b>	<u>\$10,000,000 Aggregate</u>
<b>Amendment Amount</b>	<u></u>
<b>Total Contract Amount</b>	<u>\$10,000,000 Aggregate</u>
<b>Cost Center</b>	<u>9184834200</u>

**IT IS HEREBY AGREED AS FOLLOWS:**

**Amendment No. 1  
Assignment and Consent to Assignment**

This Assignment and Consent to Assignment of Contract Number 19-541 (Assignment and Consent) is made and entered into, by and among San Bernardino County (County) on behalf of Arrowhead Regional Medical Center, Santa Rosa Consulting, Inc. (Assignor) and Santa Rosa Staffing, Inc. (Assignee).

1. Assignor and Assignee hereby agree that Assignor shall assign all its rights, title, and interest, and delegate all its obligations, responsibilities, and duties, in and to Contract Number 19-541 (Contract), to Assignee as of February 19, 2021.
2. Assignee hereby accepts the assignment of all of Assignor's obligations, responsibilities, and duties under the Contract and all of Assignor's rights, title, and interest in and to the Contract.
3. The County, pursuant to Section C.3 to the Contract, hereby consents to the assignment by the Assignor to the Assignee.
4. The County, in executing its consent to this Assignment and Consent, does not release Assignor from any claims or remedies it may have against Assignor under the Contract for obligations incurred prior to the effective date of the assignment.

5. **Counterparts.** This Amendment may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Amendment. The parties shall be entitled to sign and transmit an electronic signature of this Amendment (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment upon request.

IN WITNESS WHEREOF, the Board of Supervisors of San Bernardino County has caused this Assignment and Consent to be subscribed to by the Clerk thereof, and the Assignor and Assignee have each caused this Assignment and Consent to be subscribed on their behalves by their respective duly authorized officers, the day, month, and year written.

SAN BERNARDINO COUNTY

ASSIGNOR: Santa Rosa Consulting, Inc.

►  
\_\_\_\_\_  
Curt Hagman, Chairman, Board of Supervisors

By ► \_\_\_\_\_  
(Authorized signature - sign in blue ink)

Dated: \_\_\_\_\_  
SIGNED AND CERTIFIED THAT A COPY OF THIS  
DOCUMENT HAS BEEN DELIVERED TO THE  
CHAIRMAN OF THE BOARD

Name \_\_\_\_\_  
(Print or type name of person signing contract)

Lynna Monell  
Clerk of the Board of Supervisors  
San Bernardino County

Title \_\_\_\_\_  
(Print or Type)

By \_\_\_\_\_  
Deputy

Dated: \_\_\_\_\_

Address \_\_\_\_\_

ASSIGNEE: Santa Rosa Staffing, Inc.

By ► \_\_\_\_\_  
(Authorized signature - sign in blue ink)

Name \_\_\_\_\_  
(Print or type name of person signing contract)

Title \_\_\_\_\_  
(Print or Type)

Dated: \_\_\_\_\_

Address \_\_\_\_\_

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
► \_\_\_\_\_  
Charles Phan, Deputy County Counsel  
Date \_\_\_\_\_

Reviewed for Contract Compliance  
► \_\_\_\_\_  
Date \_\_\_\_\_

Reviewed/Approved by Department  
► \_\_\_\_\_  
William L. Gilbert, Director  
Date \_\_\_\_\_